POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*F.*		*5/30/12*
O.I.P.E. CLASSIFIER		*8*	*8-3/00*
FORMALITY REVIEW	*B7.*	*JC 897.*	*10-00-00*
RESPONSE FORMALITY REVIEW	*2/7*	*CC 561*	*12-29-00*

BEST AVAILABLE COPY

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim Final	Original	Date								Claim Final	Original	Date								Claim Final	Original	Date							
	1	✔	✔								51										101									
	2	✔	✔								52										102									
	3	✔	✔								53										103									
	4	✔	✔								54										104									
	5	✔	✔								55										105									
	6	✔	✔								56										106									
	7	✔	✔								57										107									
	8	✔	✔								58										108									
	9	✔	✔								59										109									
	10	✔									60										110									
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	13	✔									63										113									
	14	✔									64										114									
	15	✔									65										115									
	16	✔									66										116									
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	18	✔	✔								68										118									
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	49										99										149									
	50										100										150									

If more than 150 claims or 10 actions
staple additional sheet here

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